

## AMENDMENTS TO THE CLAIMS

### Listing of Claims

The following listing of claims replaces all previous listings or versions thereof:

1. (Currently amended) A method of treating, in a human patient, a malignant tumorous disease characterized by EpCAM expression elevated relative to healthy state of a given tissue comprising administering to said patient a human antibody comprising a heavy chain with the amino acid sequence of SEQ ID NO: 1 and a light chain with the amino acid sequence of SEQ ID NO: 2, wherein said human antibody specifically binds to the human EpCAM antigen, said method comprising the step of administering said human antibody once every ~~one to two~~three weeks in order to treat said malignant tumorous disease.
2. (Currently amended) The method of claim 1, further comprising:
  - (a) determining, after a period of at least one week following a respective last administration of said antibody but prior to a respective next administration of said antibody, the serum level of said antibody still present in the blood of said patient, thereby obtaining an intermediate serum level value for said antibody;
  - (b) comparing said intermediate serum level value for said antibody with a predetermined serum trough level value for said antibody; and
  - (c) effecting the respective next administration if the intermediate serum level value for said antibody is no more than 15%, preferably 10%, most preferably 5% above the serum trough level value.
3. (Previously presented) The method of claim 1, wherein the magnitude of the dose of said human antibody administered is set such that, at the end of the intervening time between two respective administrations, the amount of said human antibody persisting in the serum does not drop below the predetermined serum trough level.

4. (Canceled)
5. (Currently amended) The method of claim [[4]] 1, wherein ~~said administering takes place once every two weeks and wherein~~ the administered dose of said human antibody remains unchanged from one administration to the next.
6. (Currently amended) The method of claim [[4]] 1, wherein ~~said administering takes place once every two weeks and wherein~~ both the administered dose of said human antibody and the frequency of administration remain unchanged from one administration to the next.
7. (Previously presented) The method of claim 5, wherein the magnitude of the initial and all subsequent doses is determined by pharmacokinetic simulation.
8. (Previously presented) The method of claim 1, wherein said administering is intravenous, intraperitoneal, subcutaneous, intramuscular, topical or intradermal administration.
9. (Previously presented) The method of claim 1, wherein said malignant tumorous disease is breast cancer, epithelial cancer, hepatocellular carcinoma, cholangiocellular cancer, stomach cancer, colon cancer, prostate cancer, head and neck cancer, skin cancer (melanoma), a cancer of the urogenital tract, *e.g.*, ovarian cancer, endometrial cancer, cervix cancer, and kidney cancer; lung cancer, gastric cancer, a cancer of the small intestine, liver cancer, pancreas cancer, gall bladder cancer, a cancer of the bile duct, esophagus cancer, a cancer of the salivatory glands or a cancer of the thyroid gland.
10. (Withdrawn) The method of claim 9, wherein said tumorous disease is prostate cancer or breast cancer and said human immunoglobulin is administered in a dosage of 1 to 7 mg per kg body weight once every two weeks.
11. (Withdrawn) The method of claim 10, wherein said human immunoglobulin is administered in a dosage of 2 to 6 mg per kg body weight once every two weeks.

12-17. (Canceled)

18. (Currently amended) The method of claim 1, wherein said human antibody is formulated for administration once every ~~two~~three weeks.

19. (Currently amended) The method of claim 1, wherein said human antibody is formulated for administration every ~~two~~three weeks and, the administered dose of said human antibody remaining unchanged from one administration to the next.

20. (Currently amended) The method of claim 1, wherein said human antibody is formulated for administration once every ~~two~~three weeks, the administered dose of said human antibody administered being set such that, at the end of the intervening time between two respective administrations, the amount of said human antibody persisting in the serum does not drop below a serum trough level determined to be necessary for therapeutic efficacy.

21-22. (Canceled)

23. (Previously presented) The method of claim 2, further comprising repeating steps (a) and (b) prior to step (c).

24. (Previously presented) The method of claim 6, wherein the magnitude of the initial and all subsequent doses is determined by pharmacokinetic stimulation.

25. (Withdrawn) The method of claim 22, wherein the cancer of the urogenital tract is ovarian cancer, endometrial cancer, or cervix cancer.

26-27. (Canceled)

28. (New) The method of claim 1, further comprising administering an antibody construct, a targeted toxin or a compound.
29. (New) The method of claim 28, wherein said antibody construct comprises a bispecific antibody construct.
30. (New) The method of claim 28, wherein said antibody construct, said targeted toxin or said compound acts on the malignant tumorous disease via T cells in the human patient.
31. (New) The method of claim 28, wherein said compound is an antineoplastic agent.
32. (New) The method of claim 28, wherein said human antibody and said antibody construct, said targeted toxin or said compound are administered at the same time, before or after the administration of the human antibody.